

97385

February 19, 2013 9:53:43 AM

N900040100

Setup Start ***NS1***

Stop *NS2*

Start Date: 2/19/13 **Start Qty:** 36.00 ***36***

Cust Item ID:

Required Date: 2/25/13 **Req'd Qty:** 36.00 ***36***

Customer:

Run Start *NR1*

Approvals: Process Plan: C2 Date: 13/02/19 Tooling:

Date:

QC: _____ Date: _____ SPC (Y/N): _____

Date:

NR2

Draw Nbr	Revision Nbr	
D2153	Rev A1	

0.00

100

PURCHASING

0.00

Purchasing

Memo

Purchasing

Issue P/O: 19119 Gas Spring P/N: SL13-10 (10lb) Possible
supplier: Spring Lift Corporation **Note: Do not ship by air**** Allow an
extra 7 to 10 business days for shipping** Material release note is required

110

Receive & Inspect for Damage & Mat'l Certs

0.00

110

Packaging

Memo

0.00

Packaging

Ensure Material Release Note is attached

120

QC6- Inspect dimensions to drawing

0.00

120

QC

Memo

0.00

Quality Control

Inspect Test Spring is 10lb

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY			
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Work Order ID 97385

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Item ID: D2153 Accept *N900040100* Setup Start *NS1*
 Revision ID: Stop *NS2*
 Item Name: Door Prop
 Start Date: 2/19/13 Start Qty: 36.00 *36* Cust Item ID:
 Required Date: 2/25/13 Req'd Qty: 36.00 *36* Customer:
 Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start *NR1*
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130 *130* Small Fab	Small Fab	0.00				35x	1x		<i>[Signature]</i> 13/03/14
Small Fab	Memo 1- Assemble as per Dwg D21532- Remove Spring Lift name and address with Acetone, leave only warning: "DO NOT OPEN HIGH PRESSURE"	0.00							
140 *140* QC	QC5- Inspect part completeness to step on W/O	0.00				35			<i>[Signature]</i>
Quality Control	Memo	0.00							
150 *150* Packaging	Identify as per dwg & Stock Location: <u>SD60</u>	0.00							<i>[Signature]</i> 43/3/14
Packaging	Memo	0.00							35

NCR: ☒ Yes ☐ No

WORK ORDER NON-CONFORMANCE / UPDATE

DOA auth Date: 13/04/01QA Closed: OK Date: 13/3/20

Work Order: <u>97385</u>	DISPOSITION Rework <input type="checkbox"/> Scrap <input checked="" type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS			
Part No. <u>D 2153</u>		Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input checked="" type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>
NCR No. <u>13-2489</u>					

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data	13/03/14	130	1	Found 1 part with no written on it & supplier.	DAS 16 03/14/2 13/3/20	Scrap & destroy No replace \$10.34	SB 13/03/14	DAS 27 13-3-18	DAS 16 03/14/2 13/03/20
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General		
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain	<input type="checkbox"/> Ovalized
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware	<input type="checkbox"/> Over/Under tolerance
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Part Incorrect
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Lost/Missing
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Part Moved
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Positioned Wrong
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread	<input type="checkbox"/> Power Loss/Surge
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset	<input type="checkbox"/> Pressure/Forced
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration	<input type="checkbox"/> Temperature/Cure
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Weld
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Wrong Stock Pulled
			<input type="checkbox"/> Other

Work Order ID 97385***97385***

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Item ID: D2153 Accept ***N900040100*** Setup Start ***NS1***
Revision ID: Stop ***NS2***
Item Name: Door Prop
Start Date: 2/19/13 Start Qty: 36.00 ***36*** Cust Item ID:
Required Date: 2/25/13 Req'd Qty: 36.00 ***36*** Customer:
Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start ***NR1***
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
160	QC21- Final Inspection - Work Order Release	0.00							
160									
QC	Memo	0.00							
Quality Control									

MLJ 13-03-20

13-03-19

Picklist Print

February 19, 2013 9:53:42 AM

Page 1

Work Order ID: 97385

Parent Item: D2153

Parent Item Name: Door Prop

Start Date: 2/19/13

Required Date: 2/25/13

Start Qty: 36.00

Required Qty: 36.00

Comments: IPP: E 02.07.08 Re-format KJ/RF

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
AN960JD516 Washer	NAS1149D0563J	Purchased	No			130	Each	2.0000	2	72		2/13/03/14	
				Location		Loc Qty		Loc Code					
				ST504		2							
					1069059	2							
D2153P Door Prop		Purchased	No			130	Each	0.0000	1	36		97385	
D3015-3 Locknut		Manufactured	No			130	Each	195.0000	2	72		2/13/03/14	
				Location		Loc Qty		Loc Code					
				ST023		195							
				92381		45							
				95758		100							
				96151		50							
SL69-BS Ball Stud		Purchased	No			100	Each	266.0000	2	72		2/13/03/14	
				Location		Loc Qty		Loc Code					
				GA		212							
				123498		12							
				124455		200							
				ST397		54							
				118145		54							

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

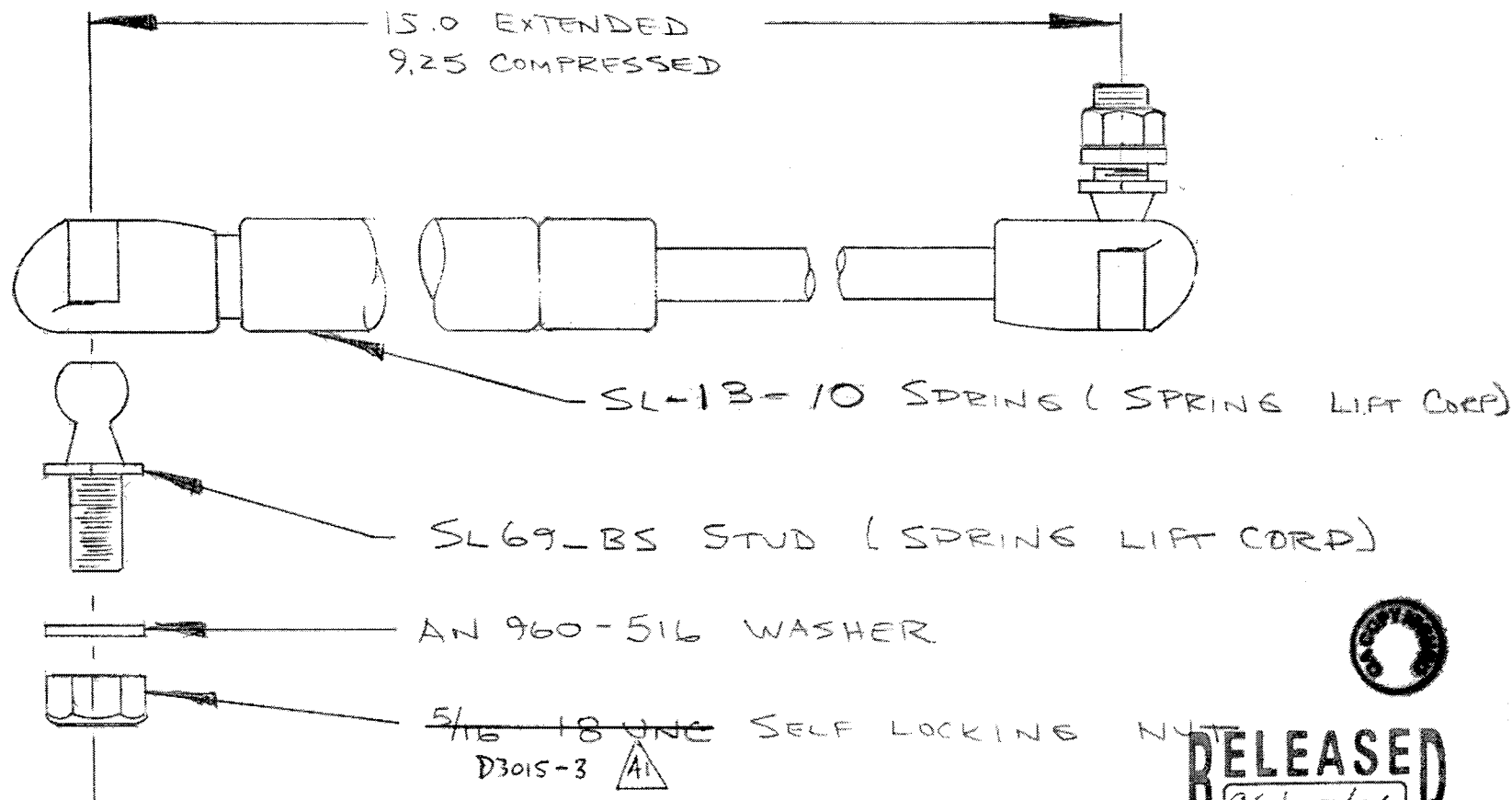
DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											

FAULT CATEGORY			
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

CZ 13/02/19
W10. 97385



RELEASED
96/07/16

01.05.09 CHANGE TO D3015-3 SC 13-10 W10 SL32-15	AI	REVISION	THIS DRAWING IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COMPILED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT THE PERMISSION OF DART AERO.	RIVET CODE SHALL BE PER NAS 523		PART NO.	ITEM	DESCRIPTION	MATERIAL	SPEC/VENDOR	
	AI	DRAWN		BASIC CODE	ON DASH NO.	CONTRACT NO.		DART DART AERO ACCESSORIES INC. VANCOUVER CANADA			
	AI	APPROVED		D-DIMPLE DIGIT NO OF SHEETS C-COUNTERSINK	ON HEAD NEAR SIDE F-HEAD FAR SIDE	DATE	DESIGN				
	REQUIREMENTS — UNLESS OTHERWISE SPECIFIED			BASIC CODES		STRESS	TITLE				
	GENERAL			LIMITS	BASIC CODES		CHECKED	CODE	DMC NO	REV	
1. DIMENSIONS ARE IN INCHES 2. SURFACE ROUGHNESS 125 / 3. REMOVE SHARP EDGES .015 MAX 4. THREADS PER MIL - 1. 7742 5. HOLES PER AND 10367			1. TOLERANCES — .XK & .030 2. ANGLES 1/4" & .010 3. PARALLELISM .0025 4. ECCENTRICITY .005 MAX 5. SYMMETRY ABOUT ALL M/C CENTRE LINES .005		B-M520470AD BR-M520476AD		GAS SPRING ASSEMBLY		DZ153		
REPORT ALL DISCREPANCIES — DO NOT SCALE										SCALE 1:1	SHT 1 OF 1

102153



Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID PO19119

Purchase Order Date 2/19/13

PO Print Date 2/19/13

Page Number 1 of 1

Order From :

VU-ATT001

ATTWOOD
25349 NETWORK PLACE
CHICAGO, IL 60673-1253
US

Contact Name

Vendor Phone

616-897-2285

Vendor Fax

616-897-8358

Vendor Account Nbr

Buyer

Chantal Lavoie

Requisition Nbr

Tax Resale Nbr

10127-2607

Terms

Net 30

Currency

USD

FOB

Destination-Collect

Ship To :

DART AEROSPACE LTD

1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA

FAKED
02/13/13

Line Nbr	Reference Revision ID Vendor Part Number	Description/ Mfg ID	Req Date/ Taxable	Req Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
1	D2153P	Door Prop	2/25/13 Yes	36.00 Each	FedEx PI collect	\$4.1300	\$148.68

Special Inst: AS PER DWG D2153 REV. A
B97385
GAS SPRING P/N: SL13-10 (10 LBS)

PO Total:

\$148.68

CERTIFICATE OF CONFORMITY
REQ'D UPON DELIVERY

Change Nbr: 1

Change Date: 2/19/13

No substitution or deviation without
consent.

Certificate of Conformity or Material
Certification required - YES NO

attwood
genuine ingenuity
TELEPHONE: 616-897-2290

MotorGuide
NEVER STOP.

CUST: 68580 MST: 11395-00

COLLECT 151793240

BILL TO: DART AERO LTD.
REQ: 02/22/13

PRO NO: 778104464
SHIP VIA: FEDEX GROUND
BOL: 00226970003402339

FREIGHT: _____

F ATTWOOD / MOTORGUIDE

R

D 1016 NORTH MONROE

M LOWELL MI 49331-0260

INCOTERMS: EXW SHIPPER DOCK

DART AERO LTD.

T 1270 ABERDEEN STREET

D

HAWKESBURY ON K6A 1K7

CRTS: 1 PD#: P019119

WGT: 12 DATE: 03/03/13

SPUR:

LABEL NO:

--ROUTING GUIDE INFO --

--SHIPPED--

CRTS	QTY	LOCATN	UM	PART#	7	UFC	DESCRIPTION / SKU	LN	QTY	WGT	ORD
1	36	W03911	EA	SL13-10-1			SS SPRNG 15" EXTC 10# BL	1	36	12	